						U. S. Patent	and Tra	approved demark C	for use throu office; U.S. D nless it displa	gh 10/3 EPART ays a ya	1/2002. OME MENT OF C lid OMB cont	0651-0032 OMMERCE onl number	
Approved for use through 10/31/2002. OMB 0651-0032 U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Pancrovork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control pumber. Application or Docket Number 10/722,125													
CLAIMS AS FILED - PART 1 (Column 2)								SMALL ENTITY OR SMALL ENTITY					
FOR NUMBER FILED					NUMBER EXTRA			ATE	FEE	[RATE	FEE	
BASIC FEE									s	OR		s 770	
(37.0	FR 1.16(6)) L CLAIMS		19 minus 20 =		· 0		× \$.	=		OR	x \$=	0	
010	FR 1.16(e)) PENDENT CLA		2 minus 3 =		* 0		× _			OR	×=	0	
(37 CFR 1.16(h)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+_			OR	+=	0	
* If the difference in column 1 is less then zero, enter "0" in column 2								OTAL	0	OR	TOTAL	770	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SM	IALL EI	YTITY	OR	OTHER TH SMALL EN		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMEN		HIGHE NUME PREVIOU PAID F	ER USLY	PRESENT EXTRA	R	RATE TIONAL FEE	TIONAL		RATE	ADDI- TIONAL FEE	
	Total	* 17	Minus		20	= 0	x \$.	=		or	x \$=	0	
	(37 CFR 1.16(e)) Independent (37 CFR 1.16(b))	* 3	Minus	***	3	- 0	× .	=		OR OR	x=	0	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(4))									OR	+=	0	
 	(Calama I)								0	OR	TOTAL DDIT, FEE	0	
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER		HIGHI NUM PREVIC PAID	EST BER OUSLY	PRESENT EXTRA	ADDI.	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 15	Minus		20	- 0		=		OR	x \$=	0	
	(37 CFR 1.16(e)) Independent	• 2	Minus	***	3	- 0	_ x.			OR	x=	0	
	(37 CFR 1.16(b)) FIRST PRESENTATION OF MULTIPLE DEPE			PENDENT		(37 CFR 1.16(d))	 -	=		OR	+=	0	
-	(Column 1) (Column 2) (Column 3)								0	OR	TOTAL ADDIT. FEE	0	
AMENDMENT C		CLAIMS REMAININ AFTER AMENDMEN		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	•	Minus	**		=	x	\$=		OR	x \$=		
	Independent (37 CFR 1.16(b))	up .	Minus	***		=	\[x			OR	l _v =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))] [-	=		OF	+=	=	
	Icaba anteriore	— <u> </u>	TOTAL		OF	TOTAL							
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3. •• If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". •• If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".													

The "Highest Number Previously Paid For" (Total or Independent) is the nignest number return in an application of the control of the individual case.

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